

SEP 06 2005

**Fax Transmittal****DATE:** September 6, 2005

Total Pages Including Cover: 12

**TO:** Examiner Patrick L. Edwards  
Art Unit: 2621**Company:** USPTO**Fax #:** 571-273-8300**Phone #:** 703-272-7390**Application  
Serial No.** 09/867,892**Docket #:** TW000002**FROM:** Michael J. Balconi-Lamica  
Reg. No. 34,291Michael J. Balconi-Lamica  
Patent Attorney  
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Spicewood, Texas 78669**Direct Phone #:** 512-461-2624**Direct Fax #:** 512-264-3687**E-Mail:** [mjblamica@aol.com](mailto:mjblamica@aol.com)

Should you have any problems with this transmittal, please call: 512-461-2624

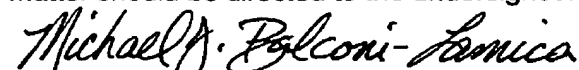
**MESSAGE: EXPEDITED PROCEDURE**Please deliver to Examiner Patrick L. Edwards, (Art Unit: 2621), Mail Stop AF

Examiner Edwards:

Attached for filing are the following documents:

1. Transmittal Form;
2. Fee Transmittal Form; and
3. Response to FINAL Office Action.

Entry of this paper in the above-identified application is courteously solicited. Any questions regarding this matter should be directed to the undersigned.



Michael J. Balconi-Lamica

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SEP 06 2005

PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031  
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	09/867,892
	Filing Date	May 30, 2001
	First Named Inventor	Rob Anne Beuker
	Art Unit	2621
	Examiner Name	Patrick L. Edwards
	Attorney Docket Number	TW000002
Total Number of Pages in This Submission		12

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks EXPEDITED PROCEDURE PLEASE deliver to Examiner Edwards (Art Unit 2621), MAIL STOP AF		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm Name	MICHAEL J. BALCONI-LAMICA	
Signature	<i>Michael J. Balconi-Lamica</i>	
Printed name	MICHAEL J. BALCONI-LAMICA	
Date	9/6/05	Reg. No. 34,291

CERTIFICATE OF TRANSMISSION/MAILING		
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:		
Signature	<i>Michael J. Balconi-Lamica</i>	
Typed or printed name	MICHAEL J. BALCONI-LAMICA	Date 9/6/05

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

PTO/SB/17 (12-04v2)

Approved for use through 07/31/2006. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

**FEE TRANSMITTAL**  
**For FY 2005**☐ Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT** (\$) 0.00**Complete if Known**

Application Number	09/867,892
Filing Date	May 30, 2001
First Named Inventor	Rob Anne Beuker
Examiner Name	Patrick L. Edwards
Art Unit	2621
Attorney Docket No.	TW000002

**METHOD OF PAYMENT** (check all that apply)☐ Check ☐ Credit Card ☐ Money Order ☒ None ☐ Other (please identify): \_\_\_\_\_☐ Deposit Account Deposit Account Number: \_\_\_\_\_ Deposit Account Name: \_\_\_\_\_

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee☐ Charge any additional fee(s) or underpayments of fee(s) ☐ Credit any overpayments**WARNING:** Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	0.00
Design	200	100	100	50	130	65	0.00
Plant	200	100	300	150	160	80	0.00
Reissue	300	150	500	250	600	300	0
Provisional	200	100	0	0	0	0	0.00

**2. EXCESS CLAIM FEES****Fee Description**

Each claim over 20 (including Reissues)

Fee (\$)	Small Entity Fee (\$)
50	25

Each independent claim over 3 (including Reissues)

200	100
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Multiple dependent claims

360	180
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**Total Claims** **Extra Claims** **Fee (\$)** **Fee Paid (\$)**

6 - 20 or HP = 0 x 50 = 0.00

HP = highest number of total claims paid for, if greater than 20.

**Indep. Claims** **Extra Claims** **Fee (\$)** **Fee Paid (\$)**

1 - 3 or HP = 0 x 200 = 0.00

HP = highest number of independent claims paid for, if greater than 3.

**Multiple Dependent Claims**

Fee (\$)	Fee Paid (\$)
	0.00

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	/ 50 =	(round up to a whole number) x		0.00

**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

**Fees Paid (\$)**

0.00

Other (e.g., late filing surcharge):

0.00

**SUBMITTED BY**

Signature	<i>Michael J. Balconi-Lamica</i>	Registration No. (Attorney/Agent)	34,291	Telephone	512-461-2624
Name (Print/Type)	Michael J. Balconi-Lamica	Date	9/6/05		

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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SEP 06 2005

PATENT  
Docket No.: TW000002  
Customer No. 000024737

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:	§	
Rob Anne Beuker et al.	§	Confirmation No. 7104
	§	
Serial No.: 09/867,892	§	Group Art Unit: 2621
	§	
Filed: May 30, 2001	§	Examiner: Patrick L. Edwards
	§	
For: METHOD AND APPARATUS FOR	§	
MERGING IMAGES INTO A	§	
COMPOSITE IMAGE (as amended)	§	

**RESPONSE AFTER FINAL**

Mail Stop AF  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Examiner:

In response to the Office Action mailed July 27, 2005, the following is being submitted for placing the above-identified application in prima facie condition for allowance. Please amend the above-identified application as follows:

**Amendments to the Claims** begin on page 2.

**Remarks/Arguments** begin on page 4.